

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



February 24, 1983

ALL-COUNTY LETTER NO. 83-14

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: BAKER v. PROD: IDENTIFICATION OF AFFECTED CLASS
MEMBERS IN AFDC

REFERENCE: ALL-COUNTY INFORMATION NOTICE I-21-83

As you were informed in All-County Information Notice (ACIN) 1-21-83 a preliminary injunction was issued February 9, 1983, in the case of Baker v. Prod. In this action the plaintiffs seek to make retroactive the decision reached in the case of Turner v. Woods, which stated that mandatory payroll deductions must be subtracted from gross income prior to allowance of disregards. The injunction in Baker v. Prod not only requires that certain records for affected cases (refer to ACIN I-21-83), it mandates methods for identification of affected applicants and recipients, requires statements from the counties on steps taken to comply with the injunction and requires that statistics be kept on the number of applicants and recipients identified as potential claimants. This letter transmits information required by paragraph B, page 5, of the injunction.

The preliminary injunction requires that four methods be used in identifying affected persons:

1. Paragraph 3, page 3, of the injunction requires that the county must inquire of all applicants for public assistance (i.e., AFDC, Food Stamps, Medi-Cal and General Assistance) whether they were affected by the treatment of mandatory payroll deductions as income during any period between January 1, 1982 and August 31, 1982. The questions in Attachment I are to be asked in order to determine the recipients potential eligibility for retroactive benefits. The county shall provide any additional assistance necessary to make this determination.

2. Paragraph 4, page 3, of the injunction requires the county to send stuffer notices with the Monthly Eligibility Report (CA 7) for March 1983, due in April. The attached language (Attachment II) must be used for this purpose.

The returned portions of the stuffer notice should be retained. At a later date it may be necessary to exchange information between a county where the recipient is currently aided and a county in which the individual was aided during the retroactive period. Counties are to print their own supplies of the stuffer notices.

3. Paragraph 5, page 4, of the injunction requires that the county must, at the time of the next redetermination for Food Stamps, Medi-Cal or General Assistance, ask the recipient whether he/she was affected by the treatment of mandatory payroll deductions as income at any time between January 1, 1982 and August 31, 1982. The questions in Attachment I are to be asked in order to determine the recipient's potential eligibility for retroactive benefits. The county shall provide any additional assistance necessary to make this determination.
4. Paragraph 6, page 4, of the injunction requires that notices informing individuals of this court action and instructing affected persons to contact the appropriate county worker must be posted in County Welfare Departments. The attached language (Attachment III), is provided to ensure that the requirements of this paragraph of the injunction are met. The actual size of the notice should be at least 14-1/2 x 22" and the notices should be posted as close to the release date of the stuffer as possible. The counties are to print their own supplies of the notice.

The names, addresses and case records of persons identified as potential claimants through any method above must be retained. Counties must bear in mind retrospective budgeting procedures when considering a respondent's potential eligibility for retroactive payments.

Plaintiffs have requested that the Department reiterate the requirements, as expressed in ACIN I-21-83, that computerized and non-computerized lists of potential claimants be retained. Please refer to the ACIN for details. Caution should be observed when purging files to ensure that affected lists or records are not inadvertently destroyed.

The court further ordered (paragraph C, page 5, of the injunction) that a statement from each county on steps taken (or planned) in order to comply with the retention requirements and claimant

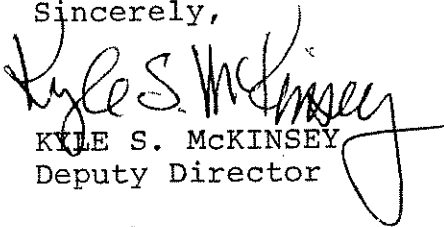
identification processes must be submitted to DSS no later than March 14, 1983. This statement should include, at a minimum, copies of the stuffer and poster used and the dates both were issued, and the method used for retaining any information that would identify persons as potentially eligible.

Additionally, in accordance with paragraph D, page 5, of the injunction, tallies on the number of potential claimants identified through methods one through four above must be kept by the county. In addition to identification of potential claimants, the number of months for which the individual may claim retroactive benefits should be noted. A statement is due to DSS on May 23, 1983, on the number of potential claimants for each county.

DSS will provide you forms for submitting the two required statements. These forms should be available within ten (10) days.

If you have any questions, please contact your AFDC Program Management Consultant at (916) 445-4458.

Sincerely,


KYLE S. MCKINSEY
Deputy Director

Attachments

cc: CWDA

ATTACHMENT I

Following are suggested questions to be asked of all applicants and recipients of AFDC, Medi-Cal, Food Stamps and General Assistance at the next eligibility review or recertification:

1. Did you receive or apply for AFDC at any time between January 1, 1982 and August 31, 1982?
2. Did you or anyone for whom you received or applied for aid work during the period November 1, 1981 and August 31, 1982?

IMPORTANT NOTICE

There is a lawsuit (**Baker v. Prod**) about whether payroll deductions like Social Security and income taxes can be counted as income in the determination of eligibility and the amount of the payment for AFDC.

If you were working at any time between November 1, 1981 and August 31, 1982 and at the same time you received or applied for AFDC, you could receive extra money as back payments.

If you think you may be eligible for back payments, fill out the bottom of this form as best as you can and return it along with your Monthly Eligibility Report, CA 7.

You will be told by the county welfare department if the court orders the extra money paid to you.

AVISO IMPORTANTE

Hay un litigio (**Baker vs. Prod**) con respecto a si las deducciones de la nómina como seguro social e impuestos sobre ingresos pueden contarse como si fueran ingresos al determinar la elegibilidad y la cantidad del pago para AFDC.

Si usted estuvo trabajando durante cualquier parte del tiempo comprendido entre el 1 de noviembre de 1981 y el 31 de agosto de 1982 y al mismo tiempo recibía o solicitó AFDC, es posible que usted pudiera recibir dinero extra por pagos atrasados.

Si usted piensa que pudiera ser elegible para recibir pagos atrasados, llene la parte inferior de esta forma lo mejor que pueda, y devuélvala junto con su Reporte Mensual de Elegibilidad, CA 7.

El Departamento de Bienestar del Condado le dirá si la corte ordena que se le pague dicho dinero extra.

I think I may be eligible for these payments. / Creo que soy elegible para recibir estos pagos.

NAME/NOMBRE (Print/con letra impresa)	FIRST/NOMBRE	MIDDLE INITIAL/INICIAL	LAST/APELLIDO
TELEPHONE NUMBER/NÚMERO DE TELÉFONO		CASE NUMBER/NO. DEL CASO	
MAILING ADDRESS/DIRECCIÓN DE CORREO (print/con letra impresa)	STREET/CALLE	CITY/CIUDAD	ZIP CODE/ZONA POSTAL

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If you think you may be eligible for back payments, contact your county welfare department for further information.

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Si usted piensa que pudiera ser elegible para recibir pagos atrasados, comuníquese con su departamento de bienestar del condado para obtener más información.